Los Arigeles County Sheriff's Department Officer Involved Shooting

								ar week	
Report Date: 8/10/2018	Bureau/Station/Facility:	Lakewood Station	n	en i en en inserenció	Admin	. Invest.?		Hit?	
		Incident Informati	into the s	notice control.					
URN: 018-17	610-1321-054	Date:	8/10	/18	Section Control	Time:	1300	Hours	Y.
City or Station:		Nature of Incident:							
Location: 5130 Clark Avenue, La Lakewood Station Jail	kewood Station kewood, CA 90712	CA Suspect Kalaau CA suspect. Responses	eared	lifeless wh	en she w	as held	hostag		
Location Type (check one or more): Backyard Beach Business Freeway Industrial Park Parking Lot	Lighting (check only one): Darkness Daylight Other Street Lights Weather (circle only one): Clear	Incident Type (check	òne ar n	nore):	Other Search	Warrant	ly one):		
Residence Rural School Street Other: Station Jail Total # of Shots Fired by Deputy	Cloudy Fog Rain Distance: Approximately 10 feet Total # of Shots Fined by Suspect	Struggle Involved Traffic Stop Unarmed Person Unintentional Vehicle Pursuit Warrant Service			Prior Activit Detectiv Inmate Other Routine	ve Transport	nly one)		
4	O Shots Fired by Suspect	Other:	Hosta	ige	Aero Un	nit?	Canir	ne Unit?	
		Employee Witness	2 4 674						施
Employee # Last N	lameFire	Name .	M.I.	ShiftTime (che		ShiftType (Regular	_	_	vhr
Employee # Last N	ame Fin	t Name Joseph	M.J.	ShiftTime (che	ck only one):	ShiftType (check onl		-
Employee # Last N	Spracher Fire	Robert	M.I.	ShiftTime (che	cit only one):	ShiftType Regular	(check on	dy one):	
No. of the last of	The second secon	on-Employee Witne				Carp Carp			W
Last Name			First I	Name	and the first of the	rássamás Asass	N	A.L.	71
Street Address	City		Zip C	ode W	lork Ph		Home Ph	1	_
Last Name			First I	Name			N	A.L.	
Street Address	City		Zip C	ode W	fork Ph		Home Ph		
Last Name			First I	Name			N	A.I.	
Street Address	City		Zip C	ode W	lork Ph		Home Ph	I	
		Supervisors							
Employee # Last Name	Badali First N	Joseph	M.L.	(check one of ✓ On Duty ✓ Present of	luring shoot			to shooting	Spill .
Employee # Last Name	First N Finney	_{lame} John	MJ	Check one o	r more):		Witness	to shooting	g
	ramoy			Present	turing shoot	ing 🗌	Involve	d in shootin	g
Employee# Last Na	me	Watch Sergean		irst Name				M.I.	Ances:
Lingio w	Martin		,		Jenn	у		randa	
and the second second second second		Watch Command	ler					A second	i i
Employee # Last Na	me Badali			irst Name	Josep	h		M.I. A	

PSTD Use Only
SH #

Officer Involved Shooting

018-17610-1321-054

Page

		A 9		F	Rollout Information					
Arrival Da	ate 8/1	0/18	Arrival Time	617 Hours	Date Submitted		Date of Recommendation			
Employe	e #	Last Name		Dan	9	First Name	Luan	,,	M.I.	٧
Employe	e #	Last Name		Chan	g	First Name	Francois		M.I.	Н
Employe	e #	Łast Name		Dinh	1	First Name	Minh		M.I.	G
				Shooti	ng / Force Inform	nation				
(BC) (BI) (BF) (BF)	d Arwen Baton:(Control) Baton:(Impact) Bodily Fluids Canine		(OV) (OB) (OO) (PK) (PS)	Other Weapor Personal Wea	: Blunt Object	(AB) (BR) (BU) (CP)	of Injury Abrasion Bruise Burn Complaint of Pain	Body F (AD) (AK) (AR) (BK)	Abdome Ankle Arm Back	-
(CR) (Carotid Restrain	t	(PH)		pon (Hand/Arm)	(CO)	Concussion	(BT)	Buttock	8

Denne	·		100	_
(OE)	Other Weapon: Edged	(UC)	Uncooperative	
(FL)	Flashlight	(TR)	Taser	
(FB)	Flashbang	(ST)	Stun Bag	
(FO)	Firearm (Other)	(SB)	Sting Ball	
(FS)	Firearm (Shotgun)	(SG)	37mm Stinger	
(FR)	Firearm (Rifle)	(SH)	Shield	
(FH)	Firearm (Handgun)	(SP)	Sap	
(EX)	Explosives	(RE)	Restraint Device: REACT Belt	
(TG)	Chemical Agents (Tear Gas)	(TP)	Restraint Device Hobble (TARP)	
(OC)	Chemical Agents (OC Spray)	(HB)	Restraint Davice Hobble (Legs Only)	
(CE)	Chemical	(RH)	Restraint Device (Handcuffs)	
(TD)	Control Holds:(Takedown)	(CN)	Restraint Device (Capture Net)	
(TT)	Control Holds:(Team Takedown)	(RS)	Resistance	
(CT)	Control Holds:(Control Techniques)	(PO)	Personal Weapon (Other)	
(CH)	Choke Hold	(PP)	Personal Weapon (Push)	
(0,0)	Chirolia Libertaint	(1-1-1)	Setsoum Assebou (Hittum/Vitti)	

(PL)	Flashlight Other Weapon: Edged		(TR) Task (UC) Unc	ooperativ	10
Bran	d	(IV)	Iver Johnson	(RO)	Rossi
(AK)	AK-47	(JE)	Jennings	(SW)	Smith & Wesson
(BN)	Benelli	(LO)	Lordin	(SR)	Sturm Ruger
(BR)	Beretta	(LU)	Luger	(\$\$)	SIG Saver
(BW)	Browning	(MA)	Martin	(ST)	Sterling
(CH)	Charter Arms	(MO)	Mossberg	(TA)	Taurus
(CO)	Colt	(NC)	NCI ake SKS	(WE)	Weatherby
(DA)	Davis Industries	(NA)	North American	(WN)	Winchester
(GL)	Glock	(NO)	Norinco	(US)	US Government
(HA)	Harrington & Richardson	(RA)	Raven	(YY)	Handmade (Inmate)
(HI)	Hi Standard	(RM)	Remington	(XXX)	Homemade (Non-Inmate)
(HK)	H&K	(RG)	RG	(ZZ)	Other Brand
(IT)	Ithica	(RI)	RGI	,,	

Typ	e of Injur	У		Boo	ty Pai	t Injured		
(AB) Abrasion (BR) Bruise (BU) Bruise (CD) Complaint (CO) Concussio (DH) Death (DI) Dislocatio (DB) Dog Bite (FR) Fractures (GS) Gurshol (HB) Human Bi (LC) Laceratior (ND) Nerve Des (DD) Organ Des (PA) Parelysis (PW) Puncture 1 (SD) Soft Tiesu (ST) Sprain/Tw (UN) Unconscio		t of Pain on ite ns mage mage Wound to Dama sists		(AC (AK (BK (BT (CH (EL (FA) (GF (HI) (IN) (KA (LE (SH	Abdulin Abduli	Abdomen Ankle Arm Back Buttocks Chest Elbow Face Feat Fingers Genitals Groin Hand Head Hip Internal Knees Leg Neck Shoulder		
(RM) (NN)	Refused I	Med Tre	atment	(WI	R) VVr	fat		
Calib	er			L				
12) 1 20) 2 21) 22)	9 mm 10 mm 12 guage 20 guage 22-250 22 caliber 223 caliber	(25) (30) (35) (36)	.243 cal .25 calit .308 cal .357 cal 30-60 c .38 calit .40 calit	ber iber iber aliber per	(41) (44) (45) (50) (SL) (WW)	.410 guage .44 caliber .45 caliber 50 mm Stug Other caliber		

FORCE APPLIED (one code per block)

Used By (E# or S#)	Used Against (E# or S#)	Method (Code)	Brand (Code)	Caliber (Code)	Authorized Weapon? (Y/N)	Authorized Ammunition? (Y/N)	Type of Injury (Code)	Body Part (Code)
S#1	E#1	TR					NN	
S#1	E#1	00					NN	
S#1	E#2	TR					NN	
S#1	E#2	00					NN	
E#1	S#1	FH	SW	9	Y	Υ	ĠS	CH
E#2	S#1	FH	SW	9	Y	Υ	GS	CH

Officer Involved Shooting Involved Employee Information

URN: 018-17610-1321-055

Page 3 of 5

			Involve	d Employee		NAME OF STREET	
E 1	Employee #	Last Name	Solorio		First Name	Robert	M.I.
	Sex: M Race: H	Rank: Detective	Unit Assignme	ent kewood	Work Assignment (Unit De	#, Module, etc. tective Bu): reau
	ShiftTime (circle only one): EM PM Day	ShiftType (circle only one): Regular Overtime	Off Duty Intoxication/D	rug Usage?	Substance Used:		
	Hospital Admission?	Hospital Name:	Coroner Case	0?	Coroner Case #		Interviewed?
	Hrs of sleep prior to shooting	Duty Time (hrs): 0500-1300 Hours	Clothing (circle anly one) Plain Clothes no Vest	Reid Jacket w/ Vest	Other Factors:		
	Age: Height:	5'10" Weight: 180	Plain Clothes w/ Vest Raid Jacket no Vest	Uniform no Vest ✓ Uniform w/ Vest			
	Range Qualification Date:		PPC Qualification Date	;	Laser Training	Date:	
	Certified with Weapon Used?	Patrol Certification?	Certification Unit:	Prior Shoo	tings? Number of Shootings		Directed Force:
	Weapons Fired Brand: Smith&	Wesson Caliber 9M1	M #Shots 3	Weapons Fired Brand:	(Caliber	# Shots
	Field Training Officer Emp #				First Name		M.1.
	Field Training Officer Emp #	Last Name			First Name		M.i.
E 2	Employee #	Last Name	Fernandez		First Name	Nicholas	M.I. D
	Sex: M Race: H	Rank: Deputy	Unit Assignme	ent: kewood	Work Assignment (Unit		
	ShiftTime (circle only one):	ShiftType (circle only one): Regular Overtime	1-4115		Substance Used:		
	EM ✓ PM Day Hospital Admission?	Hospital Name:	Coroner Case	0? 🗍	Coroner Case #		Interviewed?
	Hrs of sleep prior to shooting	Duty Time (hrs): Variable	Clothing (circle only one)		Other Fectors:		<u> </u>
	Age: Height:	5'06" Weight: 155	Plain Clothes no Vest Plain Clothes w/ Vest Raid Jacket no Veel	Raid Jacket w/ Vest Uniform no Vest Uniform w/ Vest			
	Range Qualification Date:		PPC Qualification Date	2	Laser Training	Date:	
	Certified with Weapon	Patrol Certification?	Certification Unit:	Prior Sho	otings? Number of Shootings		Directed Force:
	Weapons Fired Smith&	Wesson Caliber 9MI	VI #Shots 1	Weapons Fired Brand:	(Caliber	# Shots
	Field Training Officer Emp #				First Name		M.I.
	Field Training Officer Emp#	Last Name		ta jima Azgra ya masa Madhaliy (maji 2007) a	First Name		M.I.
E	Employee #	Last Name			First Nume		M.L.
	Sex: Race:	Rank:	Unit Assignme	ent	Work Assignment (Unit	#, Module, etc	.):
	ShiftTime (circle only one):	ShiftType (circle only one): Regular Overtime	Off Duty Intoxication/D	rug Usage?	Substance Used:		
	Hospital Admission?	Hospital Name:	Coroner Cas	e?	Coroner Case #		Interviewed?
	Hrs of sleep prior to shooting	p: Duty Time (hrs):	Clothing (circle only one) Plain Clothes no Vest		Other Factors:		
	Age: Height:	Weight	Plain Clothes w/ Vest Raid Jacket no Vest	Uniform no Veet Uniform w/ Vest			
	Range Qualification Date:		PPC Qualification Date		Laser Training	Date:	
	Certified with Weapon Used?	Patrol Certification?	Certification Unit:	Prior Sho	Shootings	2	Directed Force:
	Weapons Fired Brand:	Caliber	# Shots	Weapons Fired Brand		Caliber	# Shots
	Field Training Officer Emp#				First Name		M.I.
	Field Training Officer Emp#	Last Name			First Name		M.L.

Officer Involved Shooting Suspect Information

URN

018-17610-1321-055

Page 4 of 5

	S	suspect I	nformation				
s 1 Last Name	Kalaaukahi		First Name		James	M.I. K	
AKA Last Name	00 1000 100 CO TOTAL		First Name	•		M.I.	
Sex: M Race: A	Street Addres		City			State & Zip Code:	
Work Phone: None	Home Phone: None	Social Sec	urity #:		Driver's License #:		
Age: 28 D.O.B. 6/04/91	Height: 510 Weight: 260	FB)#			CII#		
Booking # 5390752	Primary Charge: 245.3	PC	Secondar	y Charge:	209(a) PC		
Coroner Case?	Coroner Case #		Intoxication/Drug Usag	e7 🗸	Substance Used: Methampi	netamine	
Armed? Vehicle Make Mode	Apprehended?	Dana	Mental Illness?	bation:	Criminal History?	Candella	
Verifice Make Mode	el: Year.	Parol	ie: Pro	ibation:	Prior Felony	Conviction:	
S Last Name			First Name			M.I.	
AKA Last Name			First Name			M.L.	
Sex: Race:	Street Address		City			State & Zip Code:	
Work Phone:	Home Phone:	Social Sec	urity #:		Driver's License #:		
Age: D.O.B.	Height: Weight:	FBI#			CII#		
Booking #	Primary Charge:		Secondar	y Charge:			
Coroner Case?	Coroner Case #		Intoxication/Drug Usag	e?	Substance Used:		
Armed?	Apprehended?		Mental Illness?		Criminal History?		
S Last Name AKA Last Name			First Name			M.I.	
Sex: Race:	Street Address:		City		State & Zip Code:		
Work Phone:	Home Phone:	Social Seco	urity #:	Driver's License #:			
Age: D.O.B.	Height: Weight:	FBI#			CH #		
Booking #	Primary Charge:		Secondar	y Charge:			
Coroner Case?	Coroner Case #		Intoxication/Drug Usag	e?	Substance Used:		
Armed? Vehicle Make Mode	Apprehended?	Para	Mental Illness?	battan	Criminal History?	Campletina	
Vericle Make Mode	et: Year:	Parol	e: Pro	bation:	Prior Feloliy	Conviction:	
S Last Name			First Name			M.I.	
AKA Last Name			First Name			M.L.	
Sex: Race:	Street Address:		City			State & Zip Code:	
	Home Phone:	Social Sec	urity #:		Driver's License #:		
Work Phone:							
Age: D.O.B.	Height Weight	FBI#			CII#		
	Height Weight: Primary Charge:	FBI#	Secondar	ry Charge:	CII#		
Age: D.O.B.		FBI#	Secondar Intoxication/Drug Useg		Substance Used:		
Age: D.O.B. Booking #	Primary Charge: Coroner Case # Apprehended?	FBI#	Intoxication/Drug Useg				

SUPPLEMENTAL EMPLOYEE WITNESSES Los Angeles County Sheriff's Department

mployee V	/Itmosses			Page 3	10
Last Name		First Name		M.I.	
Street Address	12335 Civic Center Drive, Norwalk, CA	Zip Code 90650	Work Ph	Home Ph	
ast Name	Certantes	First Name	Lawrence	M.I.	Α
treet Address	5130 Clark Avenue, Lakewood, CA	Zip Code 90713	Work Ph (562) 623-3500	Home Ph	
ast Name	Suarez	First Name	Pablo	M.I.	S
treet Address	11515 South Colima Road, Whittier, CA	Zip Code 90604	Work Ph (562) 347-1056	Home Ph	
ast Name	Sloan	First Name	Stephanie	M.I.	М
treet Address	4850 Civic Center Way, LA, CA	Zip Code 90022	Work Ph (323) 981-5300	Home Ph	
ast Name	Finney	First Name	John	M.).	MANUFACTURE OF THE PARTY OF THE
treet Address	5130 Clark Avenue, Lakewood, CA	Zip Code 90713	Work Ph (562) 623-3500	Home Ph	
ast Name	Parriott	First Name	Brent	M,I.	A
treet Address	5130 Clark Avenue, Lakewood, CA	Zip Code 90713	Work Ph (562) 623-3500	Home Ph	
asl Name	Steinriede	First Name	Tyler	М.І.	J
treet Address	5130 Clark Avenue, Lakewood, CA	Zip Code 90713	Work Ph (562) 623-3500	Home Ph	_
ast Name	Blanchard	First Name	Tyler	M.I.	Н
treet Address	5130 Clark Avenue, Lakewood, CA	Zip Code 90713	Work Ph (562) 623-3500	Home Ph	11
ast Name	Farias	First Name	Karla	M.I.	R
treet Address	1310 West Imperial Highway, Los Angeles	Zip Code 90044	Work Ph (323) 820-6700	Home Ph	
ast Name	Manjra	First Name	Ayub	M.I.	В
tree! Address	5130 Clark Avenue, Lakewood, CA	Zip Code 90713	Work Ph (562) 623-3500	Home Ph	
sat Name	Johnson	First Name	Karen	M.I.	М
treet Address	5130 Clark Avenue, Lakewood, CA	Zip Code 90713	Work Ph (562) 623-3500	Home Ph	
ast Name	Brown	First Name	Catherine	M.I.	J
treet Address	5130 Clark Avenue, Lakewood, CA	Zip Code 90713	Work Ph (562) 623-3500	Home Ph	
ast Name	Rogers	First Name	Brett	M.I.	R
treet Address	5130 Clark Avenue, Lakewood, CA	Zip Code 90713	Work Ph (562) 623-3500	Home Ph	
ast Name		First Name		М.1.	A CANADA
treet Address		Zip Code	Work Ph "	Home Ph	
ast Name		First Name		M.I.	3 ************************************
treet Address	10.1011	Zip Code	Work Ph	Home Ph	
ast Name		First Name		M.I.	